

Vendor Remit to: BOSMA INDUSTRIES FOR THE BLIND

59 S STATE AVENUE

INDIANAPOLIS IN 46201 3876

BOSMA INDUSTRIES FOR THE BLIND

Agency Number: Facility:

12/15/2011

Hearing Aid Devices & Services

Page 1 of 1

Effective Date: **Expiration Date:**

Requisition Nbr.:

12/14/2013

ASA-RFP-11-17

0000009968 Vendor Telephone Nbr: 800/362-5463--

Vendor ID:

Name Of Contact Pers: CUSTOMER SERVICE DEPARTMENT

317/684-1946--

FAX Number:

Name and Address of Vendor:

59 S STATE AVENUE

INDIANAPOLIS IN 46201 3876

In accordance with your bid, submitted in response to the above referenced solicitation, the Vendor agrees that the Indiana Department of Administration, Procurement Division, has the option to purchase the items listed below under the terms of this agreement.

The Vendor agrees to charge these prices for any products ordered on any QPA release received after the expiration of the QPA but issued prior to the expiration date. The quantity listed herein is an estimate of the requirements. The state may order substantially more or substantially less pursuant to the terms of this agreement. Orders are to be delivered only upon receipt of properly approved Quantity Purchase Award Release.

Line Number Quantity

UNIT

Article and Description

Unit Price

This is an award of a Quantity Purchase Agreement for Hearing Aid Devices and Services. This QPA is being issued solely to provide a payment and tracking method.

Instructions for account set-up and ordering information:

- 1. Hearing Devices must be approved through the FSSA Vocational Rehabilitation Division or other State Agency once proper need has been determined.
- 2. Vendor will maintain an online ordering system that only allows the Vocational Rehabilitation Counselor or designated Agency Director access to edit or cancel orders.
- Contractor's Online Ordering System shall include the following:
- a. Orders Equipment
- b. Tracks Equipment
- Accepts E-Mailed Orders C.
- d. Edits or E-mails must be sent to customerservice@bosma.org or phoned to 800.362.5463 or 317.362.5463 and must include Client ID Number, Authorization Number, and Counselor's Name
- Provides an E-mail confirmation when the order is received from the Counselor
- Provides an E-mail confirmation when impressions are received by manufacturer
- Provides an E-mail confirmation when device is being shipped by manufacturer

*E-mail confirmations shall include a distinctive number to be used to link impressions sent by the audiologist to the counselor's order.

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0.00 EA Hearing Aid Devices & Services

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The following UN/CEFACT Unit of Measure Common Codes are used in this document:

ĒΑ Each

Signature of Purchasing Officer

Typed Name

Date Signed

Signature Of Approval

Office Of the State Attorney General

Typed Name

Gregory F. Zoeller

Date Signed

12-20-11

12-6-11 Indiana Department Of Administration **Procurement Division** 402 West Washington Street, Rm W468

Katherine L. Harrington, CPPB

Indianapolis, Indiana 46204

Telephone: (317) 232-3150